PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

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			or <u>Fax</u> (571)				
INSTRUCTIONS: This form s appropriate. All further corresp as indicated unless corrected be for maintenance fee notification	oondence including the Pa elow or directed otherwise	tent, advance orders a	nd notification of	of maintenance fees wi	ll be mailed to the curi	rent correspondence address	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) MINTZ LEVIN COHN FERRIS GLOVSKY AND POPEO, P.C. One Financial Center Boston, Massachusetts 02111				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
						(Depositor's name)	
						(Signature)	
					TO LEGISTRA DE LA COLOR DE LA	(Date)	
	FILING DATE		ED INVENTOR		EY DOCKET NO.	CONFIRMATION NO.	
10/692,764			t B. Levy	16534-539001US 8952			
TITLE OF INVENTION:	Methods of Using Subs	tituted Tetracycline C	compounds to Mo	odulate RNA			
APPLN. TYPE SMALL E	NTITY ISSUE FEE DUI	E PUBLICATION I	FEE DUE PRI	EV. PAID ISSUE FEE	TOTAL FEE(S) DUI	E DATE DUE	
nonprovisional no	\$1,740.00	\$300.00			\$2,040.00	03/08/2010	
EXAMINE	ξ	ART UNIT	CLASS-SU	BCLASS			
J. L. Epps-Sm	ith	1633	514-1				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication a registered attorney				p to 3 registered patent , alternatively, e firm (having as a member or agent) and the names of nt attorneys or agents. If no 3			
3. ASSIGNEE NAME AND							
PLEASE NOTE: Unless an for recordation as set forth (A) NAME OF ASSIGNEE	assignee is identified beld in 37 CFR 3.11. Completi	on of this form is NO	Γ a substitute for	e patent. If an assignee filing an assignment. (CITY and STATE O		document has been filed	
Paratek Pharmaceuticals,	Inc.		Boston, Massa	chusetts			
Please check the appropriate assignment	gnee category or categories (w			<u> </u>	ration or other private gro		
4a. The following fee(s) are e	enclosed:	4b. Payment of	Fee(s): (Please	first reapply any prev	iously paid issue fee s	hown above)	
x Issue Fee		A che	ck is enclosed.				
X Publication Fee (No s	mall entity discount permi	itted) X Paym	ent by credit car	d. Form PTO-2038 is a	ttached.		
Advance Order - # of	Copies			authorized to charge to the sit Account Number		deficiency, or credit any n extra copy of this form).	
5. Change in Entity Status (from status indicated above	ve)					
	MALL ENTITY status. Se	L				ss. See 37 CFR 1.27(g)(2).	
NOTE: The Issue Fee and Public interest as shown by the records			anyone other thar	the applicant; a register	rea attorney or agent; or	the assignee or other party in	
Authorized Signature	duxul	um		Da	ate Mar	ch 7, 2012	
Typed or printed name Heidi A. Erlacher, J.D., Ph.D.				Re	gistration No.	45,409	